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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.		
First Inventor	TAMMY Leilani	Peterson
Title	J	PTO

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No.

Assistant Commissioner for Patents
Box Patent Application

See MFEP chapter 600 concenting utility patient application contents. Washington, DC 20231 Section of the Transmitted Form (ag. PTOISMT) Collection of the Transmitted Form (ag. PTOISMT) Computer Program (Appendix) See 37 CFR 1.27. Collection of the Transmitted Engineering Form (ag. Ptoismt) Collection of the Transmitted Applications Collection of the Invention Collection Collection of the Invention Collection Collec	APPLICATION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application						
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- Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Description of the Drawings (If filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4.	3. Specification [Total Pages 25]							
- Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Inventor - Brief Description - Confinuation - Brief Summary of the Inventor - Brief Description - Confinuation Invention - Brief Summary of the Inventor - Brief Description - Challenge Summary of the Inventor - Brief Description - Challenge Summary of the Inventor - Brief Description - Challenge Summary of the Inventor - Brief Description - Challenge Summary of the Inventor - Brief Description - Challenge Summary of the Inventor - Brief Descriptio		b. Specification Sequence Listing on:						
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- Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4.		c. Statements verifying identity of above copies						
- Detailed Description - Claim(s) - Claim(s) - Claim(s) - Abstract of the Disclosure 4.		ACCOMPANYING APPLICATION PARTS						
- Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Sheets]] 5. Oath or Declaration [Total Pages]] 6. Oath or Declaration prior application (37 CFR 1.63 (d)) 7. Copy from a prior application (37 CFR 1.63 (d)) 8. Newly executed (original or copy) 9. (for continuation/divisional with Box 18 completed) 10. (gramma prior application (37 CFR 1.63 (d)) 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)PTO-1449 13. Preliminary Amendment 14. (Prior Recipt Postcard (MPEP 503) 15. (Should be specifically itemized) 16. (Should be specifically itemized) 17. (Should be specifically itemized) 18. (Fa CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or its equivalent. 18. (Fa CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or its equivalent. 19. Continuation Divisional Continuation-in-part (CIP) of prior application historation: 19. Continuation Divisional Continuation-in-part (CIP) of prior application and is hereby incorporated by reference. The Incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS 19. Correspondence address below 19. Correspondence address below 19. Correspondence address below 19. Country O S State MO S Zip Code LoS Q O S								
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6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Division Division	named in the prior application, see 37 CFR	16 Nonpublication Request under 35 U.S.C. 122						
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Prior application information: Examiner: Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label (Insed Gustomer No. CAlind) beredolisticities.) or Correspondence address below Name Tammy Leilani Peterson Address RR 1 Box 41 A City Tacksonville State MD Zip Code 165216 D Country U.S. Telephone 1640 295 41648 Fax — Name (Print/Type) Registration No. (Attorney/Agent) Signature Date 12 09 01		of prior application No.						
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	Name (Print/Type)	Registration No. (Attorney/Agent)						

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known FEE TRANSMITTAL **Application Number** Filing Date for FY 2002 First Named Inventor Tamm Patent fees are subject to annual revision. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Group Art Unit **TOTAL AMOUNT OF PAYMENT** Attorney Docket No. METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) 3. ADDITIONAL FEES Check Credit card Money Order None Large Entity Small Entity

Deposit	, LOCOLINE.			Fee Code	Fee (\$)	Fee Cod	Fee e (\$)	Fee Description	Fee Paid
Account Number				105	130	205	65	Surcharge - late filing fee or oath	
Deposit Account Name				127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
$\overline{}$		ized to: (check all that apply)		139	130	139	130	Non-English specification	
	(s) indicated be			147	2,520	147	2,520	For filing a request for ex parte reexamination	
= ' '	•	s) during the pendency of this		112	920*	112	920*	Requesting publication of SIR prior to	
		low, except for the filing fee	1					Examiner action	
o the aboveid	entified deposit			113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
	FEE C	ALCULATION		115	110	215	55	Extension for reply within first month	
I. BASIC F				116	400	216	200	Extension for reply within second month	
Large Entity Fee Fee	Small Entity Fee Fee	Fee Description		117	920	217	460	Extension for reply within third month	
Code (\$)	Code (\$)	F	ee Paid		1,440	218	720	Extension for reply within fourth month	
101 740	201 370	Utility filing fee	रा0-1			•		Extension for reply within fourth month	
106 330	206 165	Design filing fee		128	1,960	228	980	Extension for reply within fifth month	
107 510	207 255	Plant filing fee		119	320	219	160	Notice of Appeal	
108 740	208 370	Reissue filing fee		120	320	220	160	Filing a brief in support of an appeal	
114 160	214 80	Provisional filing fee		121	280	221	140	Request for oral hearing	
'	١	WDT0TAL (4) (4) 27	n-1	138	1,510	138	1,510	Petition to institute a public use proceeding	
	8	SUBTOTAL (1) (\$) 37	0	140	110	240	55	Petition to revive - unavoidable	
2. EXTRA (CLAIM FEES	FOR UTILITY AND R	REISSUE	141	1,280	241	640	Petition to revive - unintentional	
		Fee from Extra Claims below	Fee Paid	142	1,280	242	640	Utility issue fee (or reissue)	
Total Claims	a4 -20°	· = 4 × 9 =	36	143	460	243	230	Design issue fee	
Independent Claims	2 -3*	'= D × O =	0	144	620	244	310	Plant issue fee	
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				123	50	123	50	Processing fee under 37 CFR 1.17(q)	
Large Entity				126	180	126	180	Submission of Information Disclosure Stmt	
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description		581	40	581	40	Recording each patent assignment per	
103 18	203 9	Claims in excess of 20		361	40	**	40	property (times number of properties)	
102 84	202 42	Independent claims in exce	ess of 3	146	740	246	370	Filling a submission after final rejection (37 CFR § 1.129(a))	
104 280	204 140	Multiple dependent claim,	if not paid	140	740	240	370	For each additional invention to be	
109 84	209 42	** Reissue independent cla over original patent	aims	149	740	249	310	examined (37 CFR § 1.129(b))	
110 18	210 9	** Reissue claims in exces	ss of 20	179	740	279	370	Request for Continued Examination (RCE)	
	•	and over original patent		169	900	169	900	Request for expedited examination	

SUBMITTED BY		Complete (if applicable)				
Name (Print/Type)	Tanmy Leilani Peterson Registration No. (Attorney/Agent)	Telephone				
Signature	James Que	Date	12	109	01	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

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Deposit Account:

SUBTOTAL (2)

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